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OR Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used)  Name Registration Number Name Registration Registration Resignent and Trademark Office (USPTO) in connection at the control of the statched statement under 37 CFR 3.73(b) to: 20583  OR The address associated with Customer Number. 20583  OR City State Zip Country Telephone Email  Assignee Name and Address: V-Wave Ltd. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed the practitioners as authorized to act on behalf of the assignee SIGNATURE of Assignee of Record The individual whose signature and eitig is supplied below is authorized to act on behalf of the assignee				· · · · · · · · · · · · · · · · · · ·		1	
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Assignee Name and Address:  V-Wave Ltd. 2 Habanari Rd., Gil Amal Industrial Zone Hod Hasharon PO BOX 181, ISRAEL  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is regified in each application in which this form is used. The statement under 37 CFR 3.73(b) may be complete the practitioners appointed in this form in the population in which this Power of Attorney is to be filled.  SignATURE of Assignee of Record  The individual whose signature and tridle power of Attorney is to be filled.  SignATURE of Assignee of Record  The individual whose signature and tridle is suppliced below is authorized to act on behalf of the assignee The individual whose signature and tridle power of Attorney is to be filled.							unt his warnet?
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment doc attached to this form in accordance with 37 CPR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:    The address associated with Customer Number:   20583     OR	Practitio	ner(s) named below (if more than ten patent	practitioners are	to be	named, then a customer nu	mper mi	
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General Manager, V-Wave Ltd.		General Manager, V-Wave Ltd.  General Manager, V-Wave Ltd.  The information is required to obtain or retain a benefit by the public which is to file (and the second business).					

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retein a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.